Image# 28992097541 FEC FORM 2 STATEMENT OF CANDIDACY

| 1. (a) Name of Candidate (in full) | | | | | | | | | |
|---|--------------------------|-------------------|-----------------|------------------------|--------------------------|---------------------------|-----|---------|--|
| Tom Rooney | | | | | | | | | |
| (b) Address (number and street) | Check if address changed | | | | 2. Identification Number | | | | |
| 2336 S East Ocean Blvd | | #313 | | | H8FL160 |)22 | | | |
| (c) City, State and ZIP Code | | | | | 3. Is This | nt X New | | Amended | |
| Stuart | | FL | 34996- | | Statemer | (14) | OR | └─ (A) | |
| 4. Party Affiliation | 5. Office So | ught | (| | strict of Candi | date | | | |
| REPUBLICAN PARTY | House | | | FL 16 | i | | | | |
| DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE | | | | | | | | | |
| 7. I hereby designate the following named political committee as my Principal Campaign Committee for the (year of election) election(s). | | | | | | | | | |
| NOTE: This designation should be filed with the appropriate office listed in the instructions. | | | | | | | | | |
| (a) Name of Committee (in full) | | | | | | | | | |
| Tom Rooney for Congress | | | | | | | | | |
| (b) Address (number and street) | | | | | | | | | |
| 2336 S. East Ocean Blvd. #31 | 3 | | | | | | | | |
| (c) City, State and ZIP Code | | | | | | | | | |
| Stuart | | FL | 349 | 996- | | | | | |
| DESIGNATION OF OTHER AUTHORIZED COMMITTEES | | | | | | | | | |
| | | (Including Join | nt Fundraisino | g Representat | tives) | | | | |
| 8. I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of my candidacy. NOTE: This designation should be filed with the principal campaign committee. | | | | | | | | | |
| (a) Name of Committee (in full) | | | | | | | | | |
| Friends of Tom Rooney | | | | | | | | | |
| (b) Address (number and street) | | | | | | | | | |
| 228 South Washington Street | | Suite 115 | | | | | | | |
| (c) City, State and ZIP Code | | | | | | | | | |
| Alexandria | | VA | 223 | 314- | | | | | |
| DECLARATION OF INTENT TO EXPEND PERSONAL FUNDS (House or Senate Only) 9. I intend to expend personal funds exceeding the threshold amount (see 11 C.F.R. 400.9) by | | | | | | | | | |
| e. i intena lo expena personal funas exce | eang the thre | sonoiu amount (S | see 11 U.F.K. 4 | ιυυ. _ອ) by | | | | | |
| | 9A | | | 0.00 | for the prim | nary election, | and | | |
| 9B 0.00 | | | | | | for the general election. | | | |
| If you do not intend to expend personal fu | nds exceedin | g the threshold a | amount for eith | er election, you | u must enter "C | 0.00" for each. | | | |
| I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct, and complete. | | | | | | | | | |
| Signature of Candidate | | | | | | Date | | | |
| Tom Rooney | | | | | | 04/13/2007 | | | |
| NOTE: Submission of false, erroneous or incomplete information may subject the person signing this Statement to penalties of 2 U.S.C.§437g. | | | | | | | | | |
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| Image# 28992097542 | |
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| Form/Schedule: F2N Transaction ID: | This filing reflects the addition of Friends of Tom Rooney as an affiliated committee |
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